

Marilla Town Park Shelter Application

Name _____
Address _____
Phone No. _____

non-profit

\$25

Shelter	Amount (Full \$65 or Non-profit \$25)	Pymt (ck or cash)	Date Received
Handy #1	_____	_____	_____
Foss #3	_____	_____	_____
Shelter #2	_____	_____	_____
Shelter #4	_____	_____	_____

Number in Group _____

Reserved for (date) _____

I have received and read the Marilla Town Park Rules. A refund check will be issued after the 7th day following the event provided the shelter and area are left in good condition. If your refund check has not been cashed by December 1st it will revert back to the Park Fund.

(Signature)

(Date)

Make check payable to the Marilla Park Fund

Date Refunded _____ Amt Refunded _____ Check No. _____